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ABSTRACT

This final report summarizes the activities and findings of a research project which developed a model program for preschoolers "at risk in language." A total of 22 children, including 17 children "at risk" and 5 peers, participated in the program; the children served by the project showed increased facility with language in the form of improved test scores for language processing, oral expression, and other language skills. The program components included an enriched preschool environment emphasizing language remediation, home visits by a speech-language pathologist, support group meetings, workshops, parent consultation, and dissemination activities. The program also provided consultation to public school personnel and followup services for program participants as they were mainstreamed into public schools. Several language evaluation instruments were administered and analyzed in the project's efforts to develop and standardize the "Children's Language Institute Preschool Placement Test." Another component of the project was the development of a model program for replication in public settings; the model program was published as "A Classroom-Home Language Intervention Program for Preschool Children 'At Risk' for Language/Learning Disabilities." Appendices to the report contain newspaper articles about the project, the final social service report, and materials from a project-sponsored workshop. (JDD)

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THIRD YEAR PROGRAM SUMMATIVE REPORT

FEDERAL GRANT 84.024 PRESCHOOL PROJECT

GRANT NUMBER GOO 840 1387

PROJECT NUMBER 024 BH 50023

SUBMITTED BY: PAUL E. QUIN, PROGRAM COORDINATOR

AUGUST 3, 1987

EC 202596

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This final report will summarize the activities and findings of the third year of this three year project, as well as presenting student data for the three year period. Within the report, references to change in behaviors will be specified as either for this third year, or for the three year period. This report is based on observations and activites of the Program Coordinator, as well as written reports and data submitted by the Speech-Language Pathologist/Teacher, the Early Childhood Educator, and the Social Worker. As documented in the text to follow, all goals and objectives planned for this year of the project have been addressed.

The primary goals of this year of the project were to continue the model program for preschoolers "at risk in language," publish the test developed under this grant, as well as associated curriculum materials, and to disseminate information regarding this population of children and the program.

A description of activities and data to support the progress toward or completion of objectives presented in the grant proposal follow. These are presented by general goals as originally written in the proposal.

3.a. TO IDENTIFY A POPULATION OF CHILDREN WHOSE LANGUAGE DEFICIT CAN BE DESCRIBED AS MILD OR MILD TO MODERATELY IMPAIRED AS MEASURED BY A SPEECH-LANGUAGE PATHOLOGIST USING STANDARDIZED TESTS

The Children's Language Institute Preschool Placement Test (CLIPPT), developed and standardized during the first and second years of this project, was used as the primary screening instrument during this year. The speech-language pathologist and early childhood educator provided screening services for prospective students during the first two quarters of this year. Actual testing using the CLIPPT was done by the speech-language pathologist, while the early childhood educator interviewed the parents and assisted with information gathering.

Since the program was near capacity in October 1986, the staff felt that it would be counterproductive and not in the best interests of interested persons to advertize the program in a formal manner. For that reason, no formal announcements were sent out or submitted to newspapers. Informal word of mouth referrals were accepted and screened, as appropriate. The availability of the program was mentioned in associated informational news releases during the second quarter of the project (see Appendix A).

The CLIPPT was given to eight(8) children during this year, as part of the screening procedure. One(1) child was too impaired for the program, two(2) were "at risk" and admitted to the program, and five(5) were within normal limits with one(1) of those five(5) being admitted as a "peer."

With those children screened before October 1986 and those returning from the previous year, the class started in October 1986 with ten(10) preschoolers "at risk" and four(4) "peers." One(1) child "at risk" was admitted in December 1986 for the final class composition for this year being eleven(11) "at risk" (four females, seven males) and four(4) "peers" (two females, two males).

A total of twenty-two(22) children participated in the program during the three year grant period. These included five peers (two boys and three girls) and seventeen children "at risk" (nine boys and eight girls).

3.b. TO PLAN AND IMPLEMENT A REMEDIAL PROGRAM FOR SUCH CHILDREN

All students were pretested before entering or returning to the program, so that activites and objectives could be specifically designed to meet their needs. A pragmatic approach to choreographing language therapy in the preschool setting was continued, based on the text written and published regarding this program. Posted linguisitc targets for each child "at risk" allowed the staff to alter their language level to each child's, and enabled them to determine what forms to expect from the child. All classroom activites were designed for language remediation, yet varied from informal to formal language lessons. Arts and crafts, free play, and motor activities provided an enriched preschool environment while emphasizing language components.

Documented parent observations of the classroom ranged from 25 for one parent to none for five parents. Parents of seven(7) of the eleven(11) children "at risk" observed, as documented, while parents of three of the four "peers" observed, according to observation records. It is felt that most parents observed, as the parents transported their children and often observed either at the start of the day or at pick-up time without signing in at the school office.

Home visits were scheduled by the speech-language pathologist on a prorated basis based on five visits for the eight months of the program year. A total of fifty-three(53) home visits were provided for the families of the children "at risk."

During this year, a total of twenty-five(25) weekly support group meetings were scheduled by the social worker. Attendance at these meetings ranged from two parents to eight parents. The vast majority of those attending were mothers, with only one father attending two meetings. In addition to these meetings, eight(8) families required individual services. These were provided either in the school or at the parents' homes.

The social worker held two workshops, one regarding child development from 2½-5 years of age and one for development from 6-teenage years. Two preschool parents attended each session, with a total of four different parents attending both workshops.

The speech-language pathologist presented one workshop on language enrichment activities for the home. Two(2) parents attended this presentation. An open house was held and attended by all parents. It is felt that the informal interaction with the staff was the factor that influenced the good response.

Parent and professional consultation have been gained through the Advisory Committee and through weekly staff meetings with the full staff of Children's Language Institute. When specific problems arose, appropriate parents or members of the Advisory Committee were consulted.

The professional personnel of this grant were included in weekly two hour inservice training programs for CLI. The para-professional personnel met weekly for one half hour with the speech-language pathologist and early childhood educator. Additionally, they arrived at the program fifteen minutes before the children each day to review that day's activities. These meetings with the paraprofessionals have proven beneficial in developing their ability to shift their levels of language usage and to recognize children's individual differences in language.

The program coordinator, speech-language pathologist, early childhood educator, and the social worker have all attended professional workshops relevant to this grant during this year.

Pre-program test results were obtained for all returning students during September 1986. As children were identified, pre-testing preceded admission. Data collection was ongoing during the program, using check lists, anecdotal records, criterion referenced tests, and formal assessments. This data was reported to parents and school liaisions in semi-annual progress reports.

The observations and test results presented in the following paragraphs, in many cases, refer back to the first year of the project. The test results are presented from the time of each child's entrance to the present (May 1987) scores . Since most of the students did not have apparent receptive language difficulties, most test results reported are either global measures of language, or expressive measures. The CLIPPT incorporates both receptive and expressive language behaviors.

DATA FROM INDIVIDUAL TESTING

Children's Language Institute Preschool Placement Test (CLIPPT)

This year's group of eleven(11) children "at risk" and four(4) peers were given the standardized edition of the CLIPPT at the end of this program year. All children were in the "pass" category, indicating normal language behaviors. This information is not accurate, as all but two children were older than the normative age range of the test, which stops at four years, five months. All that can be said is that these children aged 3 years 8 months to 6 years 2 months had language at least

equivalent to a child of 4 years 5 months.

Sequenced Inventory of Communication Development (SICD).

This global test was administered to children younger than four years of age. During this year, only one child qualified by age for pre and post test data for this test. During the entire program, two other children had received two administrations of the SICD. During the average of 6.7 months time between the two administrations, these three children made 6.7 months growth in receptive communication age, while they averaged 10 months gain in expressive communication age.

Test of Language Development-Primary (TOLD-P)

During the three years of the project, thirteen(13) children received the TOLD-P at least twice. The average time between the administrations was 9.8 months with a range of 5 to 20 months between tests. The Spoken Language Quotient (SLQ) increased an average of 12.6 points with a range of -14 to +35. The average standard score increased 1.4 with a range from -1 to +3.86. The change in average quotient was a gain of 9.5 points with a range of -13.8 to +22 points. The average SLQ at entry was 90.8 with the average SLQ at exit being 103.4. This is more easily translated into average ranges, as shown on Table I. The SLQ represents a composite of all subtests. On the initial test, 31% of the children scored below the average range compared to 7% on the final test. Seven percent (7%) were in the high average or above average range at first testing, while 53% were in these categories at last testing.

TABLE I

Test of Language Development-Primary

Comparision of Spoken Language Quotients

N=13

	Initial Test		Final Test		Change	
	N	%	N	%	N	%
Below Average	4	31	1	7	-3	-23
Low Average	4	31	4	31	0	0
Average	4	31	1	7	-3	-23
High Average	0	0	5	38	5	38
Above Average	1	7	2	15	1	8

Test of Auditory Comprehension of Language-Revised (TACL-R)

The eleven(11) children "at risk" who attended the program during this year had pre and post test data for this test. An average of 11 months lapsed between first and last tests, with an average language gain of 17.9 months, or an increase of an average of 15.8 percentile points.

Language Sample Analysis

Mean Length of Utterance predicted age (Miller)

For sixteen children in the "at risk" group who attended the program, comparisons were made of MLU predicted age from entry to exit. This information is presented in Table II

TABLE II
AVERAGES OF
MEAN LENGTH OF UTTERANCE, CHRONOLOGICAL AGE, AND
PREDICTED MLU AGE

ENTRY			EXIT			CHANGE		
CA	MLU	PREDICTED AGE	CA	MLU	PREDICTED AGE	CA	MLU	PREDICTED AGE
44	3.37	33.4	59.2	5.28	51.4	15.2	1.91	18

(Above presented in months)

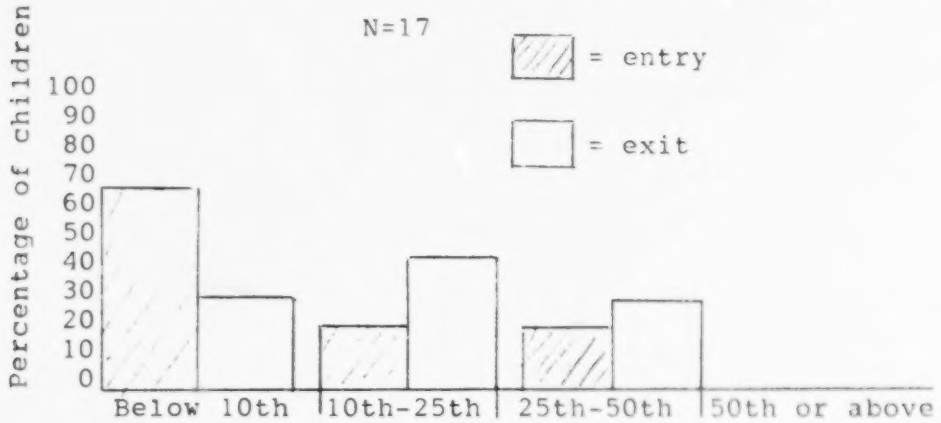
At exit, one child had a predicted age at or above his actual age, seven or 44% had a predicted age within 6 months of age (normal range), four had a predicted age 6-12 months below age ("at risk"), and four had predicted ages of 12 months or more below their age (moderately to severely impaired). Of these latter four, two will be in a classroom for moderately to severely language impaired children, one was emotionally withdrawn during testing, and one has left the program and received no rehabilitative services for the past year.

Developmental Sentence Score (Lee)

During the three years of the program, seventeen (17) children received pre and post program analysis of their language using DSS. In an average elapsed time of 15 months (ranging from 4-30 months), 47% of the children increased their DSS percentile ranking, 41% showed no change, and 12% decreased relative to their age group. At entry, 65% were below the tenth percentile, with 29% below this level at exit. In the tenth-twenty fifth percentile group at entry were 18% of children at entry, 41% at exit. The twenty fifth to fiftieth percentile group was 18% at entry and 29% at exit. This can be seen in Table III.

TABLE III

DEVELOPMENTAL SENTENCE SCORE PRECENTILES-ENTRY AND EXIT

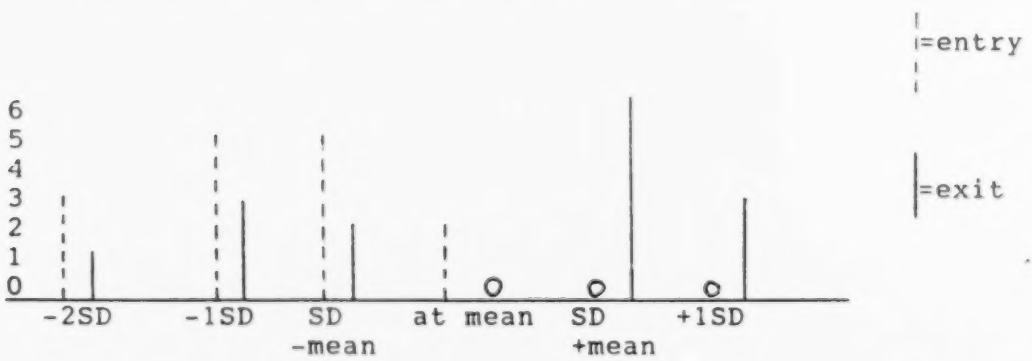


Test for Examining Expressive Morphology (TEEM)

In an average of 9.5 months between tests, the average score increased 11.2 points for the 15 children receiving this test twice. In more significant terms, 13 of the 15 children (86%) scored below the mean for their age range, with 53% of these children one standard deviation or more below the mean. At the final testing, 60% of the children tested above the mean, while 40% were below the mean. The number of children falling in various standard deviation categories is shown in Table IV.

TABLE IV

TEST OF EXAMINING EXPRESSIVE MORPHOLOGY
SCORE INTERPRETATION
(presented in Standard Deviations-SD)



Structured Photographic Expressive Language Test-Preschool

Fifteen children were tested with this at least twice to measure skill levels in expressive language. With a maximum score of 25 points, the average score increased 8.7 points or 37.2 percentile points in an average of 11.4 months between test administrations. An easier interpretation shows that on the first test, all children scored at the 40th percentile or below with 80% below the 10th percentile. On the last test, 53% scored above the 50th percentile with 33% above the 70th percentile including two with perfect scores.

Test of Pragmatic Skills (Shulman)

On this test of children's ability to formulate and express a number of communicative intentions with an adult, the peer group was compared to the "at risk" group, since responses are not penalized or credited based on grammatical correctness, semantics, or articulation. The average age of the four peers and 11 "at risk" students tested was equal, at 4.35 years. The mean composite score of the peers was 30.69, in the 98.25th percentile. The average mean composite score of the group "at risk" was 26.55, in the 79th percentile. This confirms research findings of the positive relationship between pragmatic skills and linguistic skills for many children. First and last test comparisons for children "at risk" alone showed that four decreased in percentile points relative to their age groups while seven showed an average increase in mean composite score from 26.55 to 29.88, or the 79th percentile to the 82nd percentile.

Summary of Student Test Scores

The most gains were shown by this group of children "at risk" on the TACL-R for language processing skills. Entry scores were close to the average (49th percentile), but growth exceeded chronological time. Other measures showed definite improvement in oral expressive language skills, with the most improvement shown on the SPELT-P percentiles. DSS analysis of language samples showed no children scoring above the 50th percentile at exit, although 50% of the group scored in the normal range (within six months of age), based on MLU Predicted Age.

It is difficult to make definitive statements based on student change, since the tests used were bound by age ranges. As the students increased in age, certain tests were no longer appropriate for them and others had to be used. This problem was also evident with the CLIPPT. For future study of growth, the staff would recommend expanding the CLIPPT to at least 6 years of age, so that it could be used as a consistent pre and post test for students in the program.

PARENT EVALUATION OF PROGRAM

Results of the end of the year parent questionnaire are presented in the social worker's year end report in Appendix B. This report represents responses from all parents during the 1986-87 program year. Overall responses were favorable for all aspects of the program. A detailed discussion of specific aspects of the program can be found in this report.

3.c. TO PROVIDE CONSULTATION TO PUBLIC SCHOOL PERSONNEL AND FOLLOW-UP SERVICES FOR THIS POPULATION AS THEY ARE MAINSTREAMED INTO PUBLIC SCHOOLS

As children were found appropriate for the program and were accepted, designated public school liaisons were notified of such admission for all "at risk" children. Four new children "at risk" were admitted this year and appropriate letters and reports were sent to the designated liaisons.

Throughout the year, public school personnel and students in training programs observed the program. Results of a questionnaire presented to the professionals and students who observed indicated that they were pleased with the structure of the classroom, as well as the ongoing language remediation during activities.

Each student's liaison was sent copies of two progress reports written for each child "at risk." These were written in January and May 1987 and mailed in February and July 1987. This same information was also given to the parents. Cumulative and final reports for all children "at risk" were sent to appropriate liaisons for all eleven children, since they will be entering other programs in September 1987.

A copy of this third year summative report will be available for review by public school personnel.

Mainstreaming conferences were scheduled in May and June 1987 for all eleven children "at risk," since the program was terminated in May 1987 and all students will be going to other programs. Those attending these conferences included the designated public school liaison and the CLI Preschool staff as follows: program coordinator, speech-language pathologist/teacher, early childhood educator, and social worker. At least one parent was in attendance for each conference. In many cases, support personnel and teachers from the accepting school also attended. The children's progress was discussed, as well as recommendations for the coming year.

Six students had left the program prior to October 1987. One of these students moved to another geographic area, so follow-up services could not be provided. For the remaining five students, nine follow-up visits were made. The visits afforded the project speech-language pathologist the opportunity to observe the child in the new class, meet with new staff, and make appropriate suggestions or comments. Responses from questionnaires completed by the receiving teachers indicated that all children were well prepared for their "regular" class and were average or above average in classroom performance.

Parents were encouraged to advocate for their child and to become active participants in their child's educational programming through the social worker's support group, feed back to parents of impressions from the follow-up visits for students who have left the program, and through parent conferences at the school, held in November and December 1986 and in April and May 1987.

3.d. TO DEVELOP AND DISSEMINATE A MODEL PROGRAM THAT CAN EASILY BE REPLICATED IN A PUBLIC SETTING TO SUBSTIANTIATE THE NEED AND COST EFFECTIVENESS OF EARLY INTERVENTIN FOR LANGUAGE IMPAIRED CHILDREN

Children's Language Institute published the Children's Language Institute Preschool Placement Test (CLIPPT) and A Classroom-Home Language Intervention Program for Preschool Children "At Risk" for Language/Learning Disabilities. One hundred fifty (150) copies of each manuscript were published. Most were distributed at a workshop presented by the prechool project staff (to be discussed later), but copies were also sent to each regional education office in Massachusetts, undergraduate and graduate training programs in the region, and to the Advisory Committee members. A copy of each publication is included with this report.

Publication by a national publishing house is still being sought. Interest has been expressed by two major publishers in the field of speech-language pathology, but each company wants to publish one component of the materials. The project staff is seeking one company to publish both components, as they are viewed as companion publications. If this goal is not met by the end of 1987, the two companies who have expressed interest in single components will be contacted. Communication Skill Builders in interested in A Classroom-Home...Program... while Modern Education Corporation would like to publish the CLIPPT. Both manuscripts are currently being reviewed by Syracuse University Press, Psychological Corporation, and College-Hill Press. Pending results of those reviews, a publisher, or publishers will be determined.

On October 27, 1986, the program coordinator, the speech-language pathologist and the early childhood educator presented a one and one-half hour workshop at a regional early childhood conference, "Every Child is a Promise," sponsored by the Northeast Regional Resource Center and the Massachusetts Department of Education. Approximately seventy-two people attended this presentation about this project. The audience was primarily early childhood educators with some speech-language pathologists and some administrators. Response to the program model was favorable.

A lecture was presented to graduate students in special education at American International College in October 1986 and repeated in April 1987.

Professionals were informed about the program through participation in a Professional Services Fair held at Elms College by the Western Massachusetts Speech-Language-Hearing Group in November 1987. About sixty people attended, receiving a program brochure, and viewing a videotape about the program.

A poster session was presented at the annual convention of the Massachusetts Speech-Language-Hearing Association in May 1987. The posters presented the content of the CLIPPT, as well as standardization information gathered for that test.

On May 15, 1987, the project staff presented an intensive one day workshop about the program. Brochures were mailed to all licensed speech-language pathologists in the state, all special education directors, all regional education centers, and to training programs. Additional brochures were mailed to early childhood programs listed with the state Department of Education. See Appendix C for the brochure and content presented. As stated in Appendix E page 2, participants were from five New England States, representing the local regional office of the State Department of education, 87 public schools and collaborative programs, 4 colleges and universitites, 2 state approved private schools, 16 private and public non-school system related preschools, 4 hospitals, and 4 out of state school districts. Participant response to the content of the workshop was very favorable, as indicated in the workshop evaluation response report (Appendix E). A letter sent to the staff (Appendix D) represented the verbal response expressed by many participants at the end of the day.

Each facility represented at the May 15, 1987 workshop received a copy of the CLIPPT and A Classroom-Home...Program.... Additionally, copies of the CLIPPT were distributed to representatives from facilities not pre-registered for the workshop, during the MSHA Poster Session.

Due to the inclusive nature of the two publications, no articles were submitted for state or national publications. It was felt by the project staff that such efforts would be redundant, since that information is included in the publications.

With funding approved through a grant amendment, the project was able to employ the early childhood educator as a dissemination consultant to distribute information about the project and language impairment to facilities throughout the region. Over 1000 brochures were distributed throughout 20 communities in Western Massachusetts. Visits were made to over 80 physicians, dentists, early childhood centers,hospitals, and speech-language facilities. This program has been successful, since referals have already been received for the CLI day school program for moderately to severely language impaired children, through individuals contacted as part of this dissemination program.

3.e. TO ESTABLISH AN ADVISORY COMMITTEE

The Advisory Committee continued, with one new member replacing one who had moved out of state. Four meetings of this group were held during this project year. The Committee received information from program personnel regarding finances, program activites, product development, and technical assistance. The Committee made valuable suggestions regarding the program and offered assistance in developing more effective ways of meeting some goals.

3.f. TO ENSURE PROVISION OF NEEDED SUPPLEMENTARY SERVICES

Individuals or families requiring ancillary services have been referred to appropriate services agencies for provision of these services.

3.g. TO ENSURE CONTINUATION OF THE PROJECT AFTER THE GRANT PERIOD

A proposal was submitted to the United States Department of Education to run a similar program in conjunction with the Ludlow Public Schools. Unfortunately, the proposal was not accepted.

Since the students enrolled in this program had mild language handicaps, it was not appropriate to seek a tuition rate through the state Department of Education.

Due to the June 1987 notification of rejection of the proposed program, the project staff decided that it would not be possible to gain other grant funds to continue the project in September 1987. Further grants may be submitted, based on priorities of requests for proposals received.

In summary, this third year saw continuation of the classroom-home program and substantial dissemination activities. The effect of the dissemination activities has been evidenced through professional peer recognition, referrals from associated professionals, and further requests for information about the project and language remediation.

The publication of the test and the curriculum materials was a major goal of this year. The end products are professional, thorough, and provide a means for others to implement similar programs. Initial professional response to these publicaation has been very favorable.

Student data substantiated increased facility with language for the children "at risk" served by this project. These increased skill levels will enable them to succeed in regular education with few modifications, in most instances.

The Advisory Committee has continued to be supportive of the project personnel. They have provided valuable resources enabling the staff to achieve the objectives of the project in an efficient manner.

Respectfully submitted,

Paul E. Quin

Paul E. Quin, M.S., CCC/SLP, Program Coordinator

APPENDICES

C. & L. Pre-School

Children's Language Institute has been awarded $89,781.00 by the U.S. Department of Education for continuation of a demonstration grant for pre-schoolers "at risk" in language learning abilities. One of thirty programs to be funded in nationwide competition, the program has proven remarkably successful in its first two years of operation.

During this third and final year of the grant, a pre-school placement test developed by grant personnel and a curriculum for the classroom program will be published. Both of these publications will be available through the School.

The pre-school placement test (CLIPPT) has been standardized for use with children ages 2 years 3 months to 4 years 5 months. Its' purpose is to identify children who are probable candidates for developing debilitating language or language related learning problems during their elementary school years. Using the typical pre-school developmental screens currently available, the "mildly to moderately language impaired" child would not be identified.

Under the auspices of this federal grant, children in the target population have received classroom services five days per week, two and one half hours per day. Classroom personnel include a Speech/Language Pathologist Teacher and an Early Childhood Educator with co-teaching responsibilities. The classroom staff also includes two instructional aides. Program capacity is sixteen children of which, four are peer models.

Currently, there are two openings for children "at risk" in language learning abilities. Parents may call CLI at 532-6161 if they are interested in a placement test for their child. Children accepted into the classroom program must be between the ages of 3½ and 4 years.

Professionals interested in learning more about the placement test (CLIPPT) and/or the classroom program are welcomed and may call to schedule an appointment at the same number.

Children in CLI Pre-School enjoy coloring and pasting activities.

The Chicopee Herald...November 6, 1986...Page 36

Pre-schoolers at Children's Language Institute recently celebrate a day for the Red Sox's. The program has been awarded $89,781 by the U.S. Department of Education for continuation of a demonstration grant for pre-schoolers "at risk" in language learning abilities. There is one of 30 programs that has been funded in a nationwide competition. The program has proven to be successful in its first two-years of operation.

Grant to help language disabilities test

By NANCY PICCIN

LUDLOW — The Children's Language Institute is working to develop a screening test to detect language disabilities in preschoolers and has been awarded a $89,781 grant by the U.S. Department of Education to continue its work.

"We're hoping to prove the cost-effectiveness of screening these children at an early age and providing the appropriate programs for them," said CLI founder and director Kathleen Mullins. The grant is for the third year of the three-year effort.

The thrust of the study is the theory that children whose language problems are detected and treated before they enter kindergarten or first grade will need less special education and cost the school systems less once they do enter school, she said.

In a study recently completed by the CLI, 290 children preschool from all over Western Massachusetts were screened using the test. Of those, about 40 were found to be "at risk" for language disabilities. The study will follow those children's progress and compare it with that of children who have disabilities that were not detected or treated until after they began school.

The disabilities are defined as "neurologically-based," she said. Children who do not understand verbal language or are unable to adequately express themselves verbally are included in the definition, she said.

The children who have been identified in the study have been receiving classroom services for 2½ hours, five days per week. Classroom personnel include a speech/language pathologist teacher, an early childhood educator with co-teaching responsibilities and two instructional aides.

CLI is one of 30 programs to be funded in nationwide competition. During this third and final year of the grant, the test and a and a curriculum for the classroom program will be published. Both publications will be available through the school.

The pre-school placement test (CLIPPT) has been standardized for use with children ages 2 years 5 months to 4 years 5 months.

The class of sixteen can hold two more children "at .isk" in language learning abilities. Parents may call CLI at 589-9161 if they are interested in a placement test for their child. Children must be between 2½ and 4 years.

Professionals interested in learning more about the placement test or the classroom program may call to schedule an appointment at the same number.

THE MORNING UNION, THURSDAY, NOVEMBER 6, 1986

children's language institute

June 1987

84.024 B

FINAL SOCIAL SERVICE REPORT - PRESCHOOL

September 1986 to June 1987

During this academic year, a variety of services continued to be offered to parents of preschoolers who were students in the Federal Grant Program at Children's Language Institute. With an enrollment of 11 children considered to be "at risk" for development of speech and language difficulties and 4 peer models, parents were offered the opportunity to attend weekly support groups, to avail themselves of individual counselling services when necessary and to attend workshops. Home visits were used for parents whose children were newly enrolled in the program and on an as needed basis. As in the past the initial contact with the parent took place upon the child's enrollment in the program. Parents were asked to complete a questionnaire and then a meeting was held with the social worker to discuss information in the questionnaire and to provide an introduction to the social services offered.

During the year there were 25 weekly support group meetings. At 14 of these meetings there were between 5 and 8 parents and at 11 of these meetings there were between 2 and 4 parents. Each week a notice was sent home reminding parents of the meeting and announcing a particular topic. Topics included "Relationship between Parents and Teacher and the effect on your child," Reasonable expectations of behavior and academic skills," "Sibling relationships," "What does your child do that is most annoying to you?", "Children and Parents and Grandparents." At one meeting, parents whose children had attended the preschool and left for kindergarten returned and discussed the transition process. The format was such that the topic of the week could be suspended if a parent had something else that was though to be of more importance. As in the past, the parents at these meetings were mothers. Only twice during the year did the father of a child appear at a meeting and then only because of a situation that was extremely critical in that father's perspective. It remains a concern that involving fathers in the parent aspect of the program is so difficult.

In addition to the weekly meetings, there were 8 families who required individual services from time to time throughout the year. This was provided either in the school office or at the parent's home.

Two workshops were held, one in January and one in February. The first workshop discussed children from the age of 2½ to 5 and the second workshop discussed children from the age of 6 through the teenage years. The focus in the workshops was on providing practical information about developmental stages and practical ways of dealing with different behaviors. Two preschool parents attended each session with a total of four different parents attending both workshops.

"Quality education for language impaired children"

box 211, ludlow, massachusetts 01056 telephone 413-589-9161

June 1987 FINAL SOCIAL SERVICE REPORT - PRESCHOOL

September 1986 to June 1987

In addition, there was one joint meeting held with the parents of the day school and the parents of the preschool children. The meeting between these two groups proved to be very useful and the preschool became more involved in the Friends of CLI Association, a support group for the school.

In May an end of the year questionnaire was developed and distributed to all parents, those of "at risk" children and those of the "peers". As differentiated from the past years' questionnaire, this one was looking for general thoughts and opinions from the parents on how the program had influenced their child. All parents returned the questionnaire. The results were divided into two groups, one set of findings for those children "at risk" and one set of findings for the 4 peers in the program. Of the 11 children "at risk", 3 had been in the program for all three years, 1 child had been in for 2½ years, 2 children for approximately 1½ years, and 4 children for one year with one child having been in for only 5 months. In examining which year had been the most productive for their child, there were some individual differences noted. One parent whose child had been in for 3 years felt that the first year had encouraged the child to begin speaking and that the 2nd and 3rd years had "polished her abilities" and encouraged proper vocabulary. Another parent felt that all 3 years had been productive with each year building on the previous. Another parent felt the first and second years had shown the most improvement and that the third year seemed to be primarily for play. For those children who had been in the program less than 3 years, one parent felt that the first 6 months had been very difficult for her child but that that had been because she was working and he was in a day care center after the preschool. During his second year he was not attending the other preschool and seemed much more relaxed and able to learn. One child seemed to progress very rapidly the first few months as people understood her and she seemed to be trying harder. Some parents felt their child needed the first year to become comfortable with the interaction of the preschool and therefore free enough to be able to learn.

Of the peer group, one child had been in the program for 3 years, two had been in for 2 years and one had been in for one year. The parent of the child who had been in for 3 years felt very strongly that gains had been made every year. The parents of the children who had been in for 2 years differed in their opinion with one feeling that the first year was most beneficial since this was the first opportunity for her child to be with other children. The other parent felt that her child had learned more academics and was now prepared for kindergarten.

Parents were asked to evaluate the effectiveness of various aspects of the program for their child such as the interaction with other children, the classroom experience, and interaction in various activities with both children and staff. All parents felt that the interaction with other children was a very important part of their child's development. Many felt this enable their child to begin to overcome some shyness and sensitivity. Parents felt that the small therapy groups led by the head teacher were very useful to their child as well. Other strong features of the program as noted by parents were the opportunity presented by " a show and tell " for children to speak in front of other children, the size of the classroom, and the staff-child ratio. Parents were impressed by the emphasis placed on developmental skills, learning to play and communicate, and the teaching that took place in a pragmatic way. The fact

that learning was taking place without the child being aware of being taught was of great significance to the parents.

Parents of peers who responded to this question stated that their child enjoyed getting up and talking in front of other children. Another parent felt that all aspects of the program were beneficial. She felt her child had learned to be social, to share and interact, to cooperate and to learn appropriate behavior.

Parents were asked to evaluate the language learning that took place within the classroom. All parents of "at risk" children felt that their child had improved significantly in language skills in many areas. Some factors mentioned were better articulation, use of correct tense, improved self esteem, the benefit of the informal manner of teaching. One parent mentioned that so many changes had taken place they could not be recounted but that basically her child had learned to talk. Parents were impressed with the effect of the peer models as well as the teacher modelling.

All parents of peers responded to this question. One felt that interacting with other children was more important to her child than language skill learning. Another parent commented that her child now thinks about what he will say instead of blurting it out in phrases. Another parent felt that others learned from her child. The parent whose child had been in the program for 3 years felt that he had made huge gains in language, grammar and vocabulary. She noted that the children are not even aware that they are being taught.

Parents were asked to evaluate the importance of the home visits in providing them with information on how to help their child. The parents unanimously believed that the home visits had been of great assistance in helping them to understand their child's problems and to help the child at home. They were very positive about the demonstrations offered by the head teacher on the home visits. They learned how to "play" productively and learned what <u>not</u> to do. They found the visits practical, informative, and noted that they were helped to develop awareness of how their child perceived corrections.

The sixth question dealt with the importance of the weekly newsletter, the observation booth, and the written suggestions after home visits provided by the head teacher. All 11 parents felt that the newsletter was tremendously helpful in enabling them to have a better understanding of the classroom activities. With that understanding the parents were then able to discuss activities with their child and further the child's progress. Parents also felt the observation booth was very useful in permitting them to observe their child when the child was unaware of their presence. Most parents noted that the written suggestions offered to them after the home visit were valuable in helping them follow through on the suggestions made.

Parents of peers also unanimously found the newsletter extremely helpful in keeping them informed and giving them opportunities for discussions with their child. They also felt the observation booth allowed them positive opportunities for observing their children as well.

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Parents who attended the weekly support groups were asked how useful these support groups were for them and how they could have been constructed so as to be even more useful. Comments indicated that parents found the groups very helpful in understanding how others handled the problems and enabling them to talk about their own. The group offered opportunities to form bonds of friendship and support and to relax and recognize that people did care about their problems. One parent noted she learned that "you aren't alone". A parent who had received individual counselling said she found that very useful and had wished that she had been able to attend the groups as well. One parent said she "loved them" and found it helpful to know that all people have similar problems. One parent wondered if the meetings would have been more helpful to her with more structure such as reading assignments.

Two of the parents of peers attended the meetings regularly and commented in a similar vein as the parents of the "at risk" children. One commented that it was helpful to see that everyone had similar problems and the other parent commented that the meetings were very useful to her. She felt she had been able to solve problems that had seemed hopeless to her and that the group was a very positive influence, she noted that learning what was "normal" development had been very helpful to her.

Those parents who did not attend meetings were asked about the reason for that and whether or not there was a way they could have been helped to attend more often. Three parents responded that they were unable to attend because they are employed, one parent was ill for a good part of the year. Other parents stated their reasons as special personal problems and one parent felt out of place because of the age difference. The age difference was more in the parent's mind than real.

Of the two parents of peers who did not attend the group meetings, one said she had attended a few and felt that a parent of a peer did not have a place there and the other parent was employed.

Question 9 asked parents to elaborate on those aspects of the program that were most useful and those that were least useful to them. The answers to these questions were very positive. Several parents commented that every part of the program was useful and that there were no parts of the program that were not useful. One parent said it was the best preschool she had ever been involved in, another said that talking with the teachers and learning what the child needed was the best part of the program. The home visits, the newsletter, and knowing that staff was available were also found to be very useful. One parent mentioned the least useful part of the program as being the test scores. She pointed out that had she been able to understand the meaning of the scores she probably would have found it more valuable.

The parents of peers had essentially the same thoughts. The aspects they found most useful were that the children had a chance to participate in everything. They were impressed with the one-to-one attention when needed.

Parents were asked what changes they would make in the program if they had a choice. One parent noted that better publicity would have been helpful to her since she learned of the program "accidently" by word of mouth. One parent thought 4 hour classes would have been better. Three parents suggested fewer home visits with one parent mentioning 3 instead of 5. Another parent felt that additional progress reports would be useful and that more opportunities to speak with the early childhood

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educator would have afforded her the opportunity to get more information.

The parents of peers stated that they would have made no changes and one parent said that "the program was wonderful".

The final question asked for any comments about what parents felt would be useful. The parents took that opportunity to thank the staff for a "great job." One parent commented she was grateful that the program had been there for her child. Another felt that her child would not have developed as well as he did without it. Another parent simply said "thank you".

One parent of a peer commented that her child enjoyed the entire program and was now looking forward to another school setting next year. Another parent said the total environment had been comfortable for both parent and child and that both had grown benefiting from a "great experience".

As in past years, all parent responses were very positive. There was very little negative criticism and it is interesting to note that parents of peers are as positive and enthusiastic about the program as are parents of children considered to be "at risk".

There were some disappointments from the staff's point of view during the past year in terms of low attendance at evening meetings. When parents were questioned rather casually about the reasons for these low attendace figures, responses ranged from parents being ill, to working, to having had some of the information during the previous 2 years. The past difficulty of involving fathers in the parents' discussion group and in the evening workshops continues. As noted in the past, perhaps the presence of a male therapist would be a facilitator in this particular area.

In summary, it seems again to have been a very positive year for the parents who were involved in the program and for their children. As has been demonstrated in the education field, the success rate for children seems to increase in almost direct proportion to the involvement of parents in the program. With that in mind it's clear that future planning needs to involve parents and that the staff involved needs to work on developing ways to involve both parents more successfully.

Barbara Zellan

Barbara Zellan, ACSW, LICSW
Staff Social Worker

BZ/smw

To Register complete and return this slip.

Registration is limited to 100 participating school districts, but more than one individual may represent a facility or school district.

All registrations must be received by April 30, 1987.

Participant's name:

_____

School district/facility represented:

_____

Mailing address:

_____

_____

_____

Phone: Home: _____

Work: _____

Enclose a check made payable to:
CLI PRESCHOOL WORKSHOP for

Workshop ($22) _____

ASHA CEU's ($8) _____
(includes $1 administrative fee)

Total _____

Check Luncheon choice:

____ Seafood Newburgh in pastry shell
____ Baked Breast of Chicken Teriyaki

Children's Language Institute
54 Windsor Street
P.O. Box 211
Ludlow, Massachusetts 01056
(413) 589-9161

Nonprofit Org.
U.S. Postage
PAID
Ludlow, MA 01056
Permit No. 65

Children's Language Institute
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P.O. Box 211
Ludlow, Massachusetts 01056
(413) 589-9161

Children's Language Institute

and The Massachusetts Speech-Language-Hearing Association

Present

Preschoolers "At Risk" For LLD Problems

Friday, May 15, 1987

Farwick Inn and Conference Centre
Chicopee, Massachusetts

APPENDIX C

APPENDIX C

Overview of the Preschool Project

Since 1984, CLI has been providing a preschool classroom/home program for mildly language impaired children. This federally funded project provides a screening session to identify preschoolers with mild language impairments, a half day language remediation preacademic setting with peer models, home visits and parent training by staff, parent support groups led by a social worker, and follow-up consultation after the child is placed in public school.

Educational Objectives:

The workshop participant will:

understand the pragmatic basis of classroom language intervention;

understand role releasing;

be able to interact with preschool children and their parents;

be able to provide parent training via home visits; and

be able to administer the **Children's Language Institute Preschool Placement Test (CLIPPT)**.

Children's Language Institute Presenters:

Paul E. Quin, M.S., CCC-SLP
Program Coordinator

Judith L. Bergman, M.A., CCC-SLP
Speech Language Pathologist

Mary Ann Gianni, Ed.D.
Early Childhood Educator

Barbara Zellan, ACSW, LICSW
Social Worker

Funded through MSHA Title V, Part C Grant Activities

Workshop Schedule

8:30-9:00	Registration/Refreshments
9:00-10:00	Introduction and Overview of the Project *Paul Quin*
10:00-10:30	Pragmatics as a Basis for Classroom Language Remediation *Judith Bergman*
10:30-10:45	Break
10:45-12:00	Transdisciplinary Role Releasing *Judith Bergman* Classroom Language Intervention *Judith Bergman* Joint Classroom Planning *Judith Bergman and Mary Ann Gianni*
12:00-1:00	Lunch
1:00-2:00	Interactions with Preschoolers and Parents *Barbara Zellan*
2:00-2:30	Designing the Classroom/Working with Children in Groups *Mary Ann Gianni*
2:30-2:45	Break
2:45-3:30	Home Visits/Parent Training *Judith Bergman*
3:30-4:30	Identifying the Population - The **Children's Language Institute Preschool Placement Test – (CLIPPT)** *Paul Quin and Judith Bergman*

Location

Take Mass Pike to Exit 6 - Chicopee. Follow sign for Chicopee Westover Field. At end of ramp (Route 33), turn right. The Parwick Center is on the right. Enter at the Banquet Entrance.

Intended Audience

The workshop is designed primarily for intermediate level speech-language pathologists and early childhood educators working with preschool children. It would also be beneficial for other educators, administrators, or other professionals serving preschool children.

Materials

A representative from the first 100 schools or systems will receive a copy of the curriculum and **CLIPPT** developed under this grant. Other participants may receive materials if a sufficient supply is available, based on date of receipt of registration.

Accommodations

The Parwick Inn has rooms available for participants desiring accommodations. Single or double rooms are available at $43 plus 5.7% tax by calling the hotel directly and booking through CLI Workshop. All reservations must be made before April 30, 1987 by calling (413) 592-7722.

Continuing Education

MSHA is approved by the Continuing Education Board of the American Speech-Language-Hearing Association to sponsor continuing education activities in speech-language pathology and audiology. The following program is offered for .6 Continuing Education Units (CEU's) in partial fulfillment of the requirements for the Award for Continuing Education.

ASHA APPROVED Continuing Education

Content of this workshop is in the professional area.

BEST COPY AVAILABLE

APPENDIX D

A unit of The Connecticut State University
SOUTHERN CONNECTICUT STATE UNIVERSITY
501 Crescent Street • New Haven, Connecticut 06515

Telephone 397-4574

DEPARTMENT OF COMMUNICATION DISORDERS

May 18, 1987

Kathleen K. Mullins
Executive Director
Children's Language Institute
P.O.Box 211
Ludlow, Massachusetts 01056

Dear Mrs. Mullins:

It was a pleasure to meet you after all that Paul Quin has told me about you.

You and your staff, particularly Paul, are to be congratulated on the excellent workshop presented on Friday, May 15th. Thank you for permitting me to attend this workshop. Thank you for the opportunity to hear about the program devised for these preschoolers and the test which has been devised.

I am not certain that I shall be able to use the test and the program in our University Center for Communication Disorders; but I shall certainly make the information available to our graduate students in training.

It is truly rare for a professional to have the opportunity to attend a workshop so well organized and presented.

Thank you again, and the very best of success in your helping children with communication disorders.

Yours sincerely,

Kenneth T. Gist

Kenneth T. Gist
Graduate Program Coordinator
Department of Communication Disorders

children's language institute

May 18, 1987

TO: STAFF AND PRESCHOOL ADVISORY COMMITTEE

FROM: PAUL QUIN, PROGRAM COORDINATOR

RE: EVALUATIONS BY PARTICIPANTS AT MAY 15, 1987 WORKSHOP

The comments below are based on 146 responses to the attached evaluation form returned from 219 participants (73 forms were not returned).

Of those responding to part III "Evaluation of Program Objectives," the following information was gathered. These figures were compiled for the total group, for those with above average ratings on the other parts of the evaluation, those with average ratings, and those who gave poor ratings(this breakdown will be discussed later).

OBJECTIVE	NOT ATTAINED		SOMEWHAT ATTAINED		ATTAINED	
	N	%	N	%	N	%
A-overall	2	2	16	5	112	86
above average	1	1	6	7	79	92
average	0	0	6	16	31	84
poor	1	14	4	57	2	29
B-overall	2	2	22	17	105	81
above average	0	0	8	9	78	91
average	0	0	10	27	27	73
poor	2	33	4	67	0	0
C-overall	1	1	33	26	95	74
above average	0	0	12	14	73	86
average	0	0	17	45	21	55
poor	1	17	4	56	1	17
D-overall	4	3	54	44	64	53
above average	2	2	31	37	50	60
average	0	0	20	61	13	39
poor	2	33	3	50	1	17
E-overall	2	2	33	32	68	66
above average	0	0	19	28	72	50
average	2	7	10	34	17	59
poor	0	0	4	80	1	20

-over-

The evaluations were divided into three groups, based on response regarding planning (section IV) and content (section V). These three groupings were used in the previous chart regarding whether our objectives were met. The groups were:

ABOVE AVERAGE RESPONSE (mostly 4 and 5 on 1-5 scale)
95 responses or 65% of those returned
occupational make-up: 5 unspecified, 22 Early Childhood, 3 administrators, 3 teachers of special education, 2 students, 60 speech-language pathologists

AVERAGE RESPONSE (mostly 2 and 3, some 4 on 1-5 scale)
41 responses or 28% of those returned
occupational make-up: 4 unspecified, 6 Early Childhood, 1 student, 3 directors, 1 aide, 1 teacher of special education, 26 speech-language pathologists

POOR RESPONSE (mostly 1 and 2 on 1-5 scale and based on comments)
10 responses or 7% of those returned
occupational make-up: 2 Early Childhood, 8 speech-language pathologists

In reviewing the written comments, most participants (and the presenters) agreed that the room was too crowded and hot. Further, the lunch service was poor. It was clear that the facility could not accomodate the number of individuals that they had indicated.

Many respondants felt that there was too much information for one day and suggested either a reduction in material covered or a two day workshop. The audio-visual equipment was poor for the size of the room.

A few of the "poor response" group felt that no new information was presented. Other comments regarding time of day and location of conference were not tabulated, as these were clearly outlined on the brochure, even if a small number of individuals were not pleased.

Most comments regarding content and planning were positive. The rate of such comments subjectively correlates with the percentage break-down above of above average, average, and poor.

Overall, disregarding the physical and service problems of the conference center, the presenters are pleased with the above results. We feel that we have effectively disseminated information regarding this grant to the target audience.

It should be noted that pre-registration indicated participants from five New England States (Massachusetts, Connecticut, Vermont, Rhode Island, and New Hampshire) representing the local regional office of the State Department of Education; 87 public schools and collaborative programs; 4 colleges and universities; 2 766 approved private schools; 16 private and public, non-school system related preschools; 4 hospitals; and 4 out of state school districts. We feel that this is excellent for our dissemination efforts.

Massachusetts Speech-Language-Hearing Association

CHILDREN'S
LANGUAGE INSTITUTE, INC.
Box 211 Ludlow, MA 01056
(413) 589-9161

CLINICAL AFFAIRS COMMITTEE

PROGRAM EVALUATION

I. Identification of Program

A. Title: Preschoolers At Risk for LLD Problems
B. Course/Activity Number: 0116
C. Date(s): May 15, 1987
D. Geographic Site: Parwick Convention Center, Chicopee, MA.

II. Statement of Purpose of Program:

A test to identify mildly language disordered preschoolers at risk for school failure is described. A pragmatic classroom-home model of treatment utilizes role releasing of care providers.

III. Evaluation of Program Objectives: (Please circle the number on the scale below corresponding with your achievement of the program objectives.)

OBJECTIVES	RATINGS (Not attained) 1	2	(attained) 3
A. The participant will understand the pragmatic basis of classroom language intervention.	1	2	3
B. The participant will understand role releasing.	1	2	3
C. The participant will be able to interact with preschool children and parents.	1	2	3
D. The participant will be able to provide parent training via home visits.	1	2	3
E. The participant will be able to administer the Children's Language Institute Preschool Placement Test.	1	2	3

MSHA CLINICAL AFFAIRS COMMITTEE

CHILDREN'S
LANGUAGE INSTITUTE, INC.
Box 211 Ludlow, MA 01056
(413) 589-0161

ACTIVITY EVALUATION

		Rating Scale					
IV.	Planning of Program:	Poor	Satisfactory			Excellent	
	A. Overall organization	1	2	3	4	5	
	B. Effectiveness of format	1	2	3	4	5	
	C. Geographic convenience for you	1	2	3	4	5	
	D. Convenience of day and time	1	2	3	4	5	
	E. Opportunity for interaction with instructor(s)	1	2	3	4	5	
	F. Opportunity for interaction with peers	1	2	3	4	5	
	G. If disabled, was this program accessible in terms of your individual needs?	1	2	3	4	5	N/A

H. COMMENTS: _____

_____

_____

V. Program Content: (If more than one presentor, circle as many ratings as apply to the individual presentations.)

A.	Relevancy of information to your perceived needs	1	2	3	4	5
B.	Was the information (data) accurate/substantiated?	1	2	3	4	5
C.	Was the information current, with the "state of the art?"	1	2	3	4	5
D.	Effectiveness of delivery	1	2	3	4	5
E.	Pragmatic application of information	1	2	3	4	5
F.	Organization of delivery	1	2	3	4	5
G.	Amount of information appropriate to time restraints	1	2	3	4	5
H.	Appropriate amount of discussion time	1	2	3	4	5

I. COMMENTS: _____

_____

_____

VI. Physical Facilities:

A.	Acoustics of room	1	2	3	4	5
B.	Audio-visual supports and/or handouts	1	2	3	4	5
C.	Timing of breaks	1	2	3	4	5
D.	Room comfort	1	2	3	4	5

-OVER-

Rating Scale

VI. Physical Facilities Continued:	Poor	Satisfactory			Excellent	
E. Food service, if provided	1	2	3	4	5	N/A
F. Physical accessibility, if disabled	1	2	3	4	5	N/A
G. Availability of parking facilities	1	2	3	4	5	N/A

H. COMMENTS: _____

_____

_____

VII. If this program were to be repeated, what suggestions would you have for improvements? _____

_____

_____

VIII. NEEDS ASSESSMENT: Please list topics speakers and/or formats you would suggest for future programs:

TOPICS	SPEAKERS	FORMATS

IX. Professional Data:

A. Employment or academic setting:

__school __hospital __college/university
__S-L-H clinic __spec. needs sch. __other: _____
__private practice __rehab. center _____

B. Job position/professional title (check all that apply):

__Audiologist __Dept. Head __Undergrad. Student
__S-L Pathologist __Clinic Admin. __Other: _____
__Teacher of Deaf __Graduate Student _____

C. __MSHA member __ SMSHA member __Non-member

D. Percent of professional involvement relevant to Program Topic:

__0% __26-50%
__1-25% __more than 50%

X. Please comment on this evaluation form: _____

_____